Insurance

the Third Sector

The impact of insurance on Community & Voluntary organisations



INSURANCE AND THE THIRD SECTOR

Executive Summary

The issue of insurance for the community and voluntary sector has been a serious concern for a number of years. This report on the problem has been prepared by The Wheel based on a survey carried out in 2005 of 560 organisations in the sector. The report is broken into two main sections. In Part I, the survey results are summarised using a series of tables. The focus is on comparing organisations according to the size of premiums they pay. In Part II, a more detailed statistical analysis is carried out.

The main findings in Part I are:

- The type of organisation matters health organisations or umbrella organisations, for example, pay high premiums; those working mainly in community and rural development pay low premiums.
- The client-base matters organisations working with people with disabilities pay high premiums; those working with families or communities pay lower premiums.
- Activities matter organisations whose main focus is running charity shops or fundraising pay high premiums; those with a focus on running conferences tend to pay low premiums.
- Organisations based in Dublin or those with a national scope pay high premiums;
 those in Leinster and other regions, or with a more local scope, pay lower premiums.
- Organisations who have motor, professional indemnity or directors' and officers' insurance policies all tend to pay high overall premiums; organisations that only have public liability, employee liability and/or office contents insurance tend to pay low overall premiums.
- Organisations with large staff and large turnover pay high premiums.
- Organisations which use a broker tend to pay high premiums.
- Allianz is the company insuring most organisations in the sector.
- Annual claims account for only about three per cent of annual premiums for the six years leading up to 2005.
- About 20 per cent of the 560 organisations surveyed identified problems with either the cost or availability of insurance.

The main findings in Part II of the analysis are:

- Health organisations pay higher premiums. Addiction, training and counselling organisations, and organisations involved in overseas development pay lower premiums.
- Engaging mainly in office-based activities, for any kind of organisation with any kind of client base, is always associated with substantially lower premiums.
- · Motor and professional indemnity insurance contributes most to overall premiums.
- Health and disability organisations are prone to a high take-up of professional indemnity insurance (as are addiction, training and counselling organisations, despite low overall premium bills). Outreach activities are also associated with higher professional indemnity insurance.
- Organisations in Ulster (Donegal, Cavan and Monaghan) pay higher premiums than similar organisations elsewhere.
- Arts and environmental organisations have high levels of employment insurance but low premium take-up otherwise.
- Rural and community organisations have a low take-up of motor, professional indemnity and directors' and officers' insurance – the three main contributors to a high insurance bill.
- Surprisingly, organisations with a national scope have a low take-up of motor insurance. A high take-up of motor insurance is strongly associated with carrying out fundraising activities and with having a greater number of staff.
- National or Dublin-based organisations have high turnover. Community groups, those
 with family or community client bases or those organisations that tend to carry out
 conference activities all have lower turnover than other similar organisations.
- Community and rural organisations tend to focus on office-based activities, and on outreach and organising conferences; general purpose or housing charities, on the other hand, tend to focus on fundraising and running charity shops.
- Low turnover organisations, especially those focused on the arts and the environment, tend to have problems with either cost or availability of insurance. Cost problems predominate for those with minorities, mental health and addiction client bases; availability problems predominate, on the other hand, for those with a disability group client base, or for those organisations working with families and communities.
- Broker usage is more common in Munster. Allianz is slightly more popular in Connaught. Brokers are popular with high turnover groups.

Project background

The issue of accessibility, suitability and price of various types of insurance cover has been a matter of serious concern for community and voluntary organisations for many years. The Wheel has been actively engaged in discussing this problem at policy level for some time. This insurance research project was undertaken as part of the process of building this case and creating a position from which to encourage insurance providers to develop competitive and tailored schemes for community and voluntary organisations.

A detailed questionnaire (see Appendix 1) was posted to a large sample of organisations listed on The Wheel's database and a follow-up e-mail encouraged them to complete the questionnaire. To ensure the necessary level of response, a telephone campaign ensued involving the random selection of organisations from the sample, which were phoned and encouraged to complete and return their questionnaires. New questionnaires were sent out if necessary and organisations were offered the option of completing the questionnaire over the phone.

Overall, the questionnaire was very well received. Many organisations are concerned about the lack of competitiveness, limited options, lack of understanding and inflexibility of current insurance schemes available. Twenty-one per cent said they have had problems getting insurance but many more voiced concerns in the 'other comments' section. Analysis of these comments has not been carried out for this report but it is worth including a few representative comments:

- "We would be very interested in any scheme to control/reduce our insurance cost."
- "Insurance is crippling us financially and crippling the scope for relevant youth activities."
- "I see merit in providing an umbrella scheme for the voluntary sector."
- "Costs put us off, if an activity merits insurance generally we will not do it." "There is a
 complete lack of understanding in the insurance industry with regard to volunteers
 insurance requirements while working.""
- "It took us 5 years to get cover."
- "We cannot get insurance."
- "We are extremely involved with the community and voluntary sector and identify that insurance is one of the sectors greatest concerns."

This is only the tip of the iceberg and many of the organisations that were spoken to reported that there are many groups that they work with for whom insurance is a major concern. Some of these umbrella organisations have volunteered that they would be happy to circulate details of any future schemes.

The analysis of the data yielded by the survey is divided into two sections. In Part I, the comparisons of various organisational attributes are made between high and low insurance premium groups. Much of the most useful information from the questionnaire can be found in this way. In Part II, a more detailed analysis is carried out using statistical techniques. These seek to uncover some of the more subtle patterns in the data. The two types of analysis complement each other.

Part I: Survey Findings

Of the 560 organisations that answered the survey, 85% of respondents (474 organisations) provided financial details about their insurance premiums and claims history. All information reported is based on the year 2005 (except for claims which captures information over a five year period – this is analysed at the end of this section). Figures 1 and 2 below show the breakdown in premiums paid by two groups of organisations – those with premiums of less than €10,000 and those with premiums of greater than or equal to €10,000. These tables demonstrate that whilst there is a wide spread of premiums paid within the two groups and that some organisations pay very large premiums indeed, while for the majority of groups that participated in the survey, premiums are less than about €4,000.

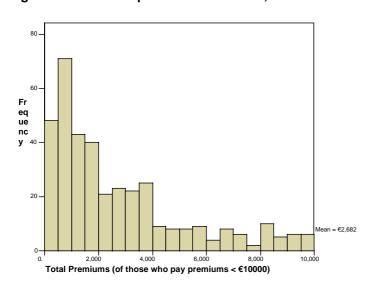


Figure 1: Premiums paid if less than €10,000

Figure 2: Premiums paid if greater than or equal to €10,000

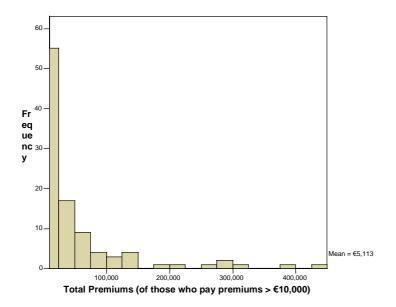


Table 1 provides a breakdown of all 560 organisations by organisation type. Many organisations declared themselves as being of two or more types (e.g. health and disability), so the total number of declared types (951) is greater than the total number of organisations surveyed (560).

| Table 1: Type of Org | ganisation (as | s % of total number of | of types declared) | |
|-----------------------|----------------|------------------------|--------------------|--|
| | | | | |
| Medical/Health | | 4.9% | | |
| Addiction | | 1.9% | | |
| Religious | | 2.3% | | |
| Human Rights/Justice |) | 2.3% | | |
| Urban/Rural Developm | nent | 3.8% | | |
| Community Developm | ent | 21.7% | | |
| Environment/Conserva | ation | 2.8% | | |
| Accomodation/Housing | ng/Homelessne | ess 3.3% | | |
| Disability Services | | 4.8% | | |
| Education&Training | | 15.7% | | |
| Arts&Culture | | 6.3% | | |
| Counselling | | 5.6% | | |
| General Charitable Pu | ırpose | 4.2% | | |
| Overseas Developmer | nt/Aid | 0.7% | | |
| Mental Health | | 1.9% | | |
| Umbrella Body | | 2.7% | | |
| Multi-purpose | | 0.2% | | |
| Other | | 14.8% | | |

Table 1 shows that organisations involved in community development and in education were the most prevalent types of organisations that responded (out of the sample of 560

organisations). Other common areas of work are counselling, arts and culture, and medical or health.

The main client bases of the sampled organisations are reported in Table 2 below.

| Table 2: Client Bases of Organ | nisations (as % of total client bases) |
|-----------------------------------|--|
| | |
| Mental Health | 1.8% |
| Men/Women | 8.6% |
| Children/Young People | 10.0% |
| Animal Welfare | 0.1% |
| People with a Physical Disability | 4.2% |
| Asylum Seekers / Refugees | 3.4% |
| Social & Economic Disadvantage | ed 8.5% |
| Drugs / Alcohol Addiction | 2.6% |
| People with a Mental Disability | 3.1% |
| Volunteers | 4.4% |
| Ethnic Minorities | 2.7% |
| General Public | 7.3% |
| Carers | 2.1% |
| Families | 6.8% |
| Older People | 7.1% |
| Local Community | 12.3% |
| Unemployed | 5.1% |
| Travellers | 3.0% |
| Gays & Lesbians | 1.4% |
| Multi-purpose | 0.3% |
| Other | 5.2% |

Table 2 shows that the main client groups of the sampled organisations include: the local community, children and young people, the unemployed, the disadvantaged, the elderly, men's and women's groups and the general public. Some of the other categories may overlap (e.g. ethnic minorities and asylum seekers) but the broad patterns seem fairly clear.

For the purpose of the analysis of the results, it is more convenient to reduce the number of categories both in Table 1 and Table 2. This reduction makes comparison between the groups easier, if a little less precise. The table itself should be read from left to right along each row.

Table 3: Types of Groups and Client Base for all Organisations and by Premium Group (by mean)

| | | Premium Payers | Low Premium <1000euro | Low-Med. Premium | Premium | MedHigh Premium 5000-20000 euro | High Premium >20000 euro |
|--------------------------|---|-------------------|-----------------------------|---------------------|---------|---------------------------------------|--------------------------|
| | No. of Organisations = | 474 | 119 | 83 | 108 | 110 | 54 |
| | Advice and Counselling (23.2%) | 0.03 | 0.03 | -0.08 | 0.24 | 0.07 | -0.32 |
| Туре | Health (11.6%) | -0.02 | -0.14 | -0.19 | -0.12 | 0.18 | 0.32 |
| of | General Charity (10.2%) | 0.01 | -0.12 | 0.11 | -0.06 | 0.02 | 0.28 |
| Group of total in | Art and Environment (11.4%) | 0.01 | 0.01 | 0.02 | 0.19 | -0.04 | -0.30 |
| | Community and Rural Development (25.5%) | 0.03 | -0.02 | 0.26 | 0.24 | -0.05 | -0.48 |
| | Overseas Dev. and Human Rights (5.3%) | -0.02 | 0.03 | 0.08 | -0.14 | -0.10 | 0.16 |
| | Family and Community Groups (62.3%) | 0.06 | -0.02 | 0.30 | 0.25 | -0.03 | -0.33 |
| Main | Minorities (10.5%) | 0.01 | -0.03 | 0.04 | 0.04 | 0.15 | -0.31 |
| Client | Disabilty Groups and Carers (9.4%) | 0.00 | -0.13 | -0.09 | 0.00 | 0.14 | 0.16 |
| Groups | Mental Health and Addiction Groups (4.4%) | 0.01 | -0.05 | -0.18 | 0.06 | 0.07 | 0.25 |
| of total in brackets) | General Public (8.4%) | -0.02 | 0.15 | 0.00 | 0.02 | -0.11 | -0.28 |

With regard to Table 3, a positive number for an organisation type or client base illustrates that this organisation type is relatively common within the relevant premium category. A negative number illustrates that the organisation type or client base is relatively uncommon within the premium category.

The biggest differences in the table are found when the group of 54 organisations paying high premiums (greater than €20,000) is compared to other groups. General-purpose charities (comprising umbrella groups, general charities and housing charities) are relatively over-represented in this high premium group. So also are groups that deal with physical and mental health.

Community and rural development organisations, on the other hand, have a low representation in the high-premium group and a high representation in the low-medium group. Organisations that deal with families and communities, with minorities groups and with the general public also all have relatively low premiums on average. Organisations dealing with the general public have an especially high representation in the lowest premium class.

Table 4 below turns the focus to the many other organisational attributes reported in the survey. Again, the full sample of 560 organisations is compared against the various premium-paying groups.

Table 4: Variety of Statistics for all Organisations and by Premium Group

| ibie 4. van | ety of Statistics for | all Olya | All | and by | rieiiiuiii | Group | | | December |
|----------------|----------------------------|----------|---------|-----------|---------------|---------------|-----------------|-------------|----------------|
| | | Full | Premium | Low | Low-Med. | Med | MedHigh | High | Premiu Zero |
| | | Survey | Payers | Premium | Premium | Premium | Premium | Premium | Missi |
| | | • | • | <1000euro | 1000-2000euro | 2000-5000euro | 5000-20000 euro | >20000 euro | |
| | No. of Organisations = | 560 | 474 | 119 | 83 | 108 | 110 | 54 | 8 |
| | Conference Organising | 54% | 55% | 50% | 55% | 56% | 64% | 46% | 50 |
| | Fundraising | 34% | 34% | 24% | 25% | 39% | 42% | 44% | 36 |
| Actvities | Running a Shop | 5% | 6% | 3% | 5% | 4% | 5% | 17% | 1 |
| (can overlap) | | 40% | 42% | 32% | 42% | 47% | 43% | 52% | 30 |
| (| Office based work | 51% | 54% | 46% | 54% | 56% | 57% | 57% | 38 |
| | Dublin Based | 33% | 32% | 23% | 29% | 26% | 45% | 46% | 37 |
| Regional | Leinster Based | 23% | 22% | 28% | 14% | 24% | 21% | 15% | 28 |
| - | Munster Based | 19% | 20% | 19% | 28% | 23% | 10% | 20% | 15 |
| | Ulster Based | 9% | 9% | 12% | 11% | 10% | 5% | 7% | 5 |
| | Connaught Based | 16% | 16% | 18% | 14% | 15% | 18% | 11% | 15 |
| Organizational | National | 20% | 19% | 63% | 66% | 75% | 56% | 28% | 27 |
| Scope | Regional | 16% | 17% | 14% | 19% | 7% | 25% | 41% | 13 |
| (can overlap) | Local | 59% | 61% | 15% | 14% | 20% | 16% | 20% | 51 |
| | Public Liability | 87% | 96% | 91% | 96% | 99% | 97% | 100% | 37 |
| Туре | Employee Liability | 70% | 78% | 55% | 82% | 79% | 89% | 96% | 26 |
| of | Property Office Contents | 71% | 79% | 55% | 82% | 81% | 92% | 96% | 24 |
| Premium | Professional Indemnity | 24% | 25% | 10% | 22% | 20% | 35% | 50% | 22 |
| (can overlap) | Motor | 18% | 20% | 5% | 12% | 15% | 23% | 67% | 8 |
| | Directors and Officers | 11% | 11% | 6% | 8% | 6% | 14% | 31% | 9 |
| Allianz or not | Allianz | 48% | 53% | 45% | 67% | 55% | 47% | 54% | 21 |
| | Turnover 1 (< 100K) | 44% | 41% | 73% | 54% | 38% | 20% | 2% | 56 |
| Turnover | Turnover 2 (100K to 500K) | 27% | 32% | 15% | 39% | 50% | 38% | 11% | 8 |
| Group | Turnover 3 (500K to 1000K) | 8% | 8% | 1% | 2% | 8% | 17% | 17% | 6 |
| (in euro) | Turnover 4 (>1000K) | 13% | 13% | 1% | 1% | 1% | 22% | 67% | 9 |
| | Problem with Insurance | 20% | 21% | 13% | 17% | 30% | 25% | 22% | 14 |
| Other | Risk Manager | 31% | 31% | 31% | 29% | 27% | 36% | 28% | 32 |
| | Broker | 62% | 68% | 57% | 59% | 65% | 81% | 89% | 24 |

From Table 4 it is notable that organisations that are running a charity shop have a comparatively strong tendency to be in the high premium group whereas those organisations that organise conferences tend to have a comparatively low probability of being in the high premium group.

Premium Size

Organisations with a national remit are over-represented in the high-premium group while organisations with a purely local remit are, albeit only slightly, over-represented in the low-premium group. Dublin organisations are over-represented in the high premium group, whereas Leinster, Ulster and Connaught organisations are under-represented.

Organisational Locality

The research also found that nearly all the very large premium payers are based in the Dublin area and that no organisation in Ulster pays a premium of more than €100,000.

Types of Cover

Apart from public liability insurance which almost all organisations reported to have, the incidence of the main other types of insurance tends to rise in the higher premiums groups. Motor insurance, for example, is nearly 14 times more common in the high-premium group as in the low-premium group, while professional indemnity insurance is five times more common in the high premium group as in the lowest one. Directors' and officers' insurance is over five times as high in the high premium group as in the low one.

Problems with Insurance

Interestingly, medium-premium organisations may have more problems with insurance than high or low premium organisations. Thirty per cent of medium premium organisations report problems, compared to an average of 21 per cent for the whole group that report premiums. In total, 113 organisations have problems with insurance. Fifty three per cent cite premium availability as their main concern, while 39 per cent cite premium costs.

Managing and Identifying Risk

Respondents were asked to indicate whether they had a risk management policy in place. Having a risk management strategy seems to vary little across premium groups, although it is slightly higher for the medium to high premium groups. High premium groups are more likely than others to use a broker. Brokers that cropped up frequently included Marsh (20 organisations), PJT (16 organisations), Coyle Hamilton (11 organisations), Kidd (10 organisations), Jardine Lloyd O'Leary Ins (eight organisations), FBD (seven organisations), McCarthy (six organisations) and Fitzgerald (five organisations). Allianz is by far the most commonly used insurance company with 48% of respondents (268 organisations) stating it as their main or sole insurers. However, the pattern of insurance company use does not appear to vary greatly across the premiums groups, except for perhaps a slight dip in preference for Allianz for the medium to high premium groups.

Organisational Turnover

High turnover is associated with high premiums. From Table 4 it can be seen that only 1 per cent of the low premium group are high turnover organisations, whereas 67 per cent of high premium organisations are high turnover organisations. High turnover organisations have significantly larger premiums than other groups, and premiums rise very sharply indeed for the highest turnover group. All the really large premium bills are paid by the highest turnover organisations.

The general picture that arises from the survey results reported in this section is that premiums can vary greatly according to a variety of organisational features. It is possible to compare some characteristics of organisations that pay the highest premiums with characteristics of organisations that pay the lowest. The most important aspects of this variation are summarised in Table 5.

Table 5: Main Features of Premium Comparison Results

| Organisational feature | Low total premium | High total premium bill |
|------------------------|-----------------------|-------------------------------------|
| | bill | |
| ORGANISATION TYPE | Community and rural | Health and disability organisation, |
| | development | general purpose (umbrella, |
| | organisations | housing, general) |
| CLIENT BASE | Family and community | Mental health and disability |
| | groups | |
| ACTIVITY FOCUS | Conference organising | Charity shop |
| REGION | Regions | Dublin |
| SCOPE | Local | National |
| MAIN INDIVIDUAL | Public liability | Motor, directors and officers, |
| PREMIUM TYPE | | professional indemnity |
| TURNOVER/STAFF | Low turnover/staff | High turnover/staff |
| OTHER FEATURES | No broker | Broker |

Insurance Claims

To conclude this section of the report, it is of considerable interest to examine claims and premiums for the different premium groups. The premium groups outlined in Table 6 below are more finely divided than before to give a more detailed picture of the claims and premium relationship.

The overall number of reported claims is small (only 78 in six years, from 2000 to 2005, or an average of 13 per year). There is a clear reduction in the percentage of claims going from the high premium, large organisations to the smaller voluntary groups. In the top group, 67 per cent recorded claims, reducing to only four per cent in the lowest premium category. It is very notable that the total amount of claims (as a percentage of premiums) is extremely small when a five-year average is taken.

Table 6: Claims and Premiums

| | All | Premium | Premium | Premium | Premium | Premium | Premium | Premium |
|-----------------------------|-----------|----------|-----------|----------|----------|---------|---------|---------|
| | premium | >100K | 50 - 100K | 20 – 50K | 10 – 20K | 5 - 10K | 1 - 5K | <1K |
| | reporting | | | | | | | |
| | orgs. | | | | | | | |
| No. organisations with | | 10 | 2 | 3 | 3 | 2 | 6 | 0 |
| incomplete claim data | | | | | | | | |
| Total Claims (corrected for | €98,4538 | €54,1500 | €19,788 | €26,7814 | €88,239 | €7,964 | €54,325 | €4,908 |
| incomplete data) | | | | | | | | |
| Claims as % premium | 8.78% | 5.61% | 1.96% | 29.24% | 12.83% | 1.6% | 11.29% | 7.15% |
| 5 yrs claims as % annual | 15.11% | 16.83% | 2.26% | 34.56% | 13.73% | 1.70% | 11.66% | 7.15% |
| premium (corrected) | | | | | | | | |
| 5 yrs claims as % of | 3.02% | 3.37% | 0.45% | 6.91% | 2.75 | 0.34 | 2.33 | 1.43 |
| estimated 5 yr premium | | | | | | | | |
| (corrected) | | | | | | | | |

Part II: Survey Findings

Part II (i): Introduction

This section of the report includes a more detailed examination of a number of the items reported by organisations in the survey. Seven specific aspects are covered here. These are:

- a) Premium amounts
- b) Insurance type (public liability, employee liability etc.)
- c) Organisational turnover
- d) Type of activity carried out by the organisation
- e) Why organisations have problems
- f) Types of problems they have with insurance
- g) Determinants of using a broker or not

The advantage of a more detailed statistical analysis is that it can supplement the purely descriptive summaries of Part 1. High turnover organisations, for example, are associated with high insurance premiums. It is not known from Part 1 however, if this is just because they have more money to spare for insurance premiums, or if they pay more premiums because of some other feature of the organisation (e.g. because they have a lot more staff). The type of statistical analysis carried out in this section aims to disentangle the separate effects of the various organisational features on a variety of organizational choices.

Part II (ii): The factors affecting the amount of premium payments

It was found that health and disability organisations pay more in premiums compared to otherwise similar organisations, while organisations dealing with overseas development and human rights, addiction, education and counselling, and the arts and environment pay a good deal less. Organisations with a client base among minorities also pay less, as do those with mainly office-based activities. Car insurance and professional indemnity are by far the largest single factors affecting premiums: organisations with motor insurance pay a lot more (about €17,000). Organisations in Ulster (Monaghan, Cavan and Donegal) also have higher premiums. (This contrasts with the result for Dublin in the previous section: organisations in Dublin may pay higher premiums but organisations in Ulster pay higher premiums than other similar organisations). Being in the high turnover group increases average premiums by about €30,000.

Part II (iii): Factors affecting the type of premiums paid

It is clear that organisational type has a large bearing on take-up of professional indemnity

insurance. Health and disability organisations and addiction and counselling organisations are

more likely than other similar organisations to take-up professional indemnity, while arts and

environmental and rural and community organisations are less likely. Organisations with a

national scope or those with high turnover are also likely to take-up professional indemnity

insurance, as are those with a minority client base or those involved in outreach activities.

Employee liability take-up is increased, unsurprisingly, by having more staff. It is also

increased by being an arts or environmental organisation, by focusing on office-based

activities and by having medium or very high turnover. Employee liability take-up is reduced

by being involved in overseas development, by having a general public client base, by

organising conference activities or by having a national scope.

Personal or office content take-up is increased if there is more staff. It is also increased by a

focus on office-based activity and by having medium or high turnover. It is reduced generally if

an organisation is of national scope.

Motor cover is increased if there is more staff, by being involved in fundraising, by having high

turnover or by being based in Leinster. It is reduced by being involved in rural and community

development, by having a general public client base or by not having a regional scope.

Directors' and officers' cover, finally, is increased by having high turnover, a national or local

scope and by having a broker. It is reduced by being in rural or community development, by

being involved with the arts or environment, or by being with Allianz.

Part II (iv): Factors affecting organisation turnover

Being classified as a health and disability organisation is associated with having higher

turnover, while being involved in community and rural development is associated with having

low turnover. The other organisational types (addiction, education and counselling, overseas

development and human rights, arts and the environment) are not significantly related to

turnover group.

14

Having a general public client base reduces turnover, while the other types of client base (minorities, mental health and addiction groups, disability groups and carers, family and community groups) appear to have no effect. The regions are all significant with the same signs as expected (the negatives are in comparison with Dublin). Having outreach activities, office-based activities or, especially, having a charity shop are all associated with higher turnover. Organising conference activities is associated with low turnover.

Part II (v): Factors affecting organisations activity focus

Community and rural development organisations tend to focus on outreach, office-based and conference activities, while general-purpose charity organisations tend to focus on fundraising or running charity shops. Arts and environmental organisations focus on organising conferences, while addiction, education and counselling organisations focus on office-based activities and outreach programs. Organisations with mental health client bases and with disabled/carers client bases focus on office-based activities. The former also focus on fundraising, as do family and community groups.

Organisations with a national scope focus on almost all types of activities, while outreach and office-based activities are lower than one would otherwise expect in Leinster and Connaught.

Part II (vi): Problems with insurance

20% of the total sample (One hundred and thirteen organisations) reported having problems with insurance. Organisations involved in the arts and environment, and low turnover organisations, have an increased probability of having problems.

Respondents were asked to rank their problems (due to cost, availability or organisational history). Lack of availability was ranked number one by 62 respondents and number two by 12 twelve respondents. Cost was ranked number one by 48 respondents and number two by 18. History was ranked by only eight respondents. A mixture of other reasons for problems was also given.

Cost is important for those with a general public client base, a minorities client base and a mental health/addiction group client base. It is not important for the high turnover group relative to other turnover groups.

Availability is important for those with a disabled/carer client base and with a family community client base. Those with a minorities client base are less likely than others to have a problem with availability. Finally, organisational history is an important hindrance to insurance for those with a disability client base.

Part II (vii): Use of broker and use of Allianz

High turnover organisations are likely to use a broker, as are organisations in Munster. Allianz is strong in Connaught and among those organisations with a mental health and addiction client base or a disability and carer client base. It is also strong among community and rural development organisations. Having directors' cover is strongly and negatively associated with using Allianz.

Part II (viii): Conclusion

This survey provides a comprehensive and important picture of insurance use and needs in the community and voluntary sector. It also provides some extra information on the sector itself, how it is organised, the groups it deals with and the activities that are being carried out within it.

The main results reported in Part I are that general purpose charities (umbrella groups, general charities and charities involved with housing) and charities involved in disability tend to pay high premiums. Community and rural development organisations tend to pay low premiums. Organisations involved with a charity shop tend to pay high premiums, while conference organising organisations tend to pay low premiums. Premiums tend to increase with turnover, especially with very large increases in turnover. Different types of individual premium are also associated with paying high overall premiums – directors' and officers' insurance, car insurance and professional indemnity insurance are all strongly associated with being in the high paying premium group. Dublin-based organisations with a national scope also tend to be in the high paying group, as do those organisations using insurance brokers.

While it is difficult to be precise, there is no doubt that claims appear to be a very small proportion of premiums – not much more than three or four per cent in any given year. This is a very small percentage indeed and it would be interesting to see the actuarial calculations on which these premiums are based.

The results of Part II (ii) suggest that car and professional indemnity insurance, especially, contribute greatly to overall premiums. The type of client base and organisational activity orientation is also important for the amount of premiums paid, as is the type of organisation. Health organisations, for example, pay more than other otherwise similar organisations. Being an addiction, training or counselling organisation, or being an overseas development organisation, can mean a smaller bill.

Activities also matter. For example, engaging mainly in office-based activities for any kind of organisation, with any kind of client base, is always associated with substantially lower premium bills.

Part II (iii) shows that health and disability organisations are prone to a high take-up of professional indemnity insurance, as are addiction, training and counselling organisations (despite low overall premium bills). Arts and environmental organisations have high levels of employment insurance but low premium take-up otherwise. Rural and community organisations have a low take-up of motor, professional indemnity and directors' and officers' insurance – the three main contributors to a high insurance bill.

Outreach activities are associated with higher professional indemnity insurance. Organisations of a national scope, surprisingly, have a low take-up of motor insurance. Take-up of motor insurance is strongly associated with carrying out fundraising activities and with having a greater number of staff.

With regard to turnover, which is examined in Part II (iv), Dublin-based, national or regional organisations have high turnover. The type of organisation, the client base and the activities carried out are all independently associated with organisational turnover. Community groups, for example, or those with family or community client bases, or those organisations that tend to have conference activities, all have lower turnover than other similar organisations.

The link between organisation type/client base and the activity orientation is further explored in Part II (v). Community and rural organisations, for example, tend to focus on office-based activities, outreach and organising conferences. General purpose and housing charities, on the other hand, tend to focus clearly on fundraising and running charity shops.

Part II (vi) shows that low turnover organisations, especially those focused on the arts and environment, tend to have problems with either cost or availability of insurance. Among the organisations that have problems, cost problems predominate for those with minorities, or general public or mental health and addiction client bases. Availability problems predominate, on the other hand, for those with a disability group client base, or those organisations working with families and communities.

In Part II (vii), it is found that using brokers tends to be more common in Munster, all else equal. Allianz is slightly more popular in Connaught. Brokers are popular with high turnover groups. Allianz is popular with community and rural organisations, with those with a mental health and addiction client base and with those with a disability/carer client base.

In conclusion, this report for the first time, compiles the data and supporting information that is needed to address some of the current issues in many cases prohibitive, surrounding cost and availability of insurance to the community and voluntary sector.

APPENDIX 1: INSURANCE QUESTIONNAIRE



INSURANCE QUESTIONNAIRE FOR COMMUNITY & VOLUNTARY ORGANISATIONS

All returns will be treated in strictest confidence.

Please complete (time required approx. 15 minutes) and return to:

The Wheel, Irish Social Finance Centre, 10 Grattan Crescent, Inchicore, FREEPOST F3030, Dublin 8. before the 22nd October 2005 – all respondents will be entered into a draw for a digital camera

The purpose of this exercise is to enable The Wheel to assess future insurance needs in order to campaign for improved and better service provision for Community and Voluntary Organisations.

| ORG | SANISATION DETAIL | S | | | |
|---------|--|---|-------------------|---------------------------------|--------------------------|
| Organis | ation | | | | |
| Contact | Name | Position | | | |
| Address | | | | | |
| Tel: | | Email: | | Wh | en established |
| 1. | Please classify your organisation | below (please tick the most rel | evant b | oxes below): | |
| | Medical/Health | Addiction | | Religious | Human Rights/Justice |
| | Urban/ Rural Development | Community Developme | ent | Environment/ Conservation | Accommodation/ |
| | | | | | Housing/Homelessness |
| | Disability Services | Education & Training | | Arts & Culture | Counselling |
| | General Charitable Purpose | Overseas Development/. | Aid | Mental Health | • Umbrella Body |
| | • If other please specify: | | | | |
| 2. | Please classify the target group o | f your organisation (please ticl | k the m | ost relevant boxes below): | |
| | Mental Health | • Men/ Women | | Children/ Young People | Animal Welfare |
| | People with a physical disability | Asylum Seekers/ Refug | ees | Social & Economic Disadvantage | Drugs/ Alcohol addiction |
| | People with a mental disability | Volunteers | | Ethnic Minorities | General Public |
| | • Carers | Family | | Older people | Local Community |
| | Unemployed | Travellers | | • Gays & Lesbians | |
| | If other please specify: | | | | |
| 3. | Please indicate below numbers of Total paid staff spending > 80% of Total paid outreach staff spending Total Volunteers (excl. Board of I Total on Board of Directors* or N * Note – your organisation will on | of their time in the office g < 20% of their time in the of Directors/Management Commi Management Committee – (sta | ttee) te which | | |
| 4. | Please indicate level of annual in Less than €100k €100k to €500k €500k to €1 million Greater than €1 million | come: (please tick relevant bo | x below |) | |
| 5. | Which best describes your organ | isation – local, regional or nat | ional? | | |
| CUR | RENT INSURANCE I | DETAILS | | | |
| 6. | ,, | - | | | |
| 7. | Are you using a broker? Yes | No If ye | s, please | specify the name of the broker: | |
| 8. | Please indicate your existing insu | irance company(s) - (direct or | throug | h a broker) | |
| | Royal & SunAlliance | Allianz | | Eagle Star | |
| | AXA/PMPA | Hibernian | | If other please specify: | |

| | | | ate your orga | mication's act | ivities e.g.: | | | |
|--|--|--|--|--|--|--|--|---|
| P | lease tick | below to indica | , , | misations act | | | | |
| | | nces/ Meetings sing events | / other activi | ities | D) Office based E) Charity Sho | | | |
| | | or Outreach so | ervices | | F) If other, plea | | | |
| P | lease indi | cate which of t | he following | insurance po | licies you have and s | ipply details: | | |
| | | | _ | | | | | |
| | | | | you have | Please rank i organisationa e.g.1,2,3 etc. | l importance | | Fremium per annum f estimate please note 'est') |
| Pı | ublic Liab | ility (PL) | | | 3 1 | | | |
| E | mployers | Liability (EL) | | | | | | |
| | | ffice/Contents | | | | | | |
| Pı | rofessiona | Indemnity | | | | | | |
| | lotor | 2.02 | | | | | | |
| | Directors & | Officers | | | | | | |
| | Other | | | | | | | |
| 10 | otal | | | | | | | |
| D | o you tak | al premium cha e out additiona e give details of | l cover for ot | ther events at | other times in the year | | hat was it last yea — No —— | |
| | yeo, preud | 6 8776 details 67 | cover and co | | | | | |
| TO | DICA | L INSUR | ANCET | TAII C | | | | |
| 10 | MCA | LINSUK | ANCE L | JE IAILS | | | | |
| In | nsurance (| Claims History | | | | | | |
| W th | We would in the below of | letails with a co | e if you woul <mark>olleague or y</mark> o | our broker. T | his information is ne | essary to ensur | | necessary for you to check so is comprehensive. Please be as |
| W th | We would in the below of | nuch appreciate letails with a co | e if you woul <mark>olleague or y</mark> o | our broker. T | | essary to ensur | | |
| th th | We would in the below of the helow of the he | much appreciate letails with a conformation given | e if you woul olleague or yo n will be treat | our broker. T red in a strictly | his information is new y confidential manne | cessary to ensur | re that the study | |
| th th | We would in the below of the be | nuch appreciate details with a conformation given made an insuration | e if you woul olleague or yo n will be treate | our broker. T red in a strictly | his information is new y confidential manne | cessary to ensur | | |
| th th | We would in the below of the be | much appreciate letails with a conformation given | e if you woul olleague or yo n will be treate | our broker. T red in a strictly | his information is new y confidential manne | cessary to ensur | re that the study | |
| th th | We would in the below of the be | nuch appreciate letails with a conformation given an an insuration of the following per of Claim Employers Liab | e if you woul olleague or yo n will be treate nce claim in ng details: | our broker. T eed in a strictly the past 5 yea | his information is new y confidential manne | ressary to ensure: No —— (If If yes, | re that the study | |
| W the | We would in the below of the be | nuch appreciate letails with a conformation given an insuration the following per of Claim | e if you woul olleague or yo n will be treate nce claim in ng details: | our broker. T ted in a strictly the past 5 yea Has the cl | his information is new y confidential manne | ressary to ensure: No —— (If If yes, | no, go to Q14) | is comprehensive. Please be as |
| W the | We would in the below of the be | nuch appreciate letails with a conformation given an an insuration of the following per of Claim Employers Liab | e if you woul olleague or yo n will be treate nce claim in ng details: | our broker. T ted in a strictly the past 5 yea Has the cl | his information is new y confidential manne | ressary to ensure: No —— (If If yes, | no, go to Q14) | is comprehensive. Please be as |
| Whath the the the the the the the the the t | We would in the below of the be | nuch appreciate letails with a conformation given an an insuration of the following per of Claim Employers Liab | e if you woul olleague or yo n will be treate nce claim in ng details: | our broker. T ted in a strictly the past 5 yea Has the cl | his information is new y confidential manne | ressary to ensure: No —— (If If yes, | no, go to Q14) | is comprehensive. Please be as |
| We the three | We would in the below of the be | nuch appreciate letails with a conformation given an an insuration of the following per of Claim Employers Liab | e if you woul olleague or yo n will be treate nce claim in ng details: | our broker. T ted in a strictly the past 5 yea Has the cl | his information is new y confidential manne | ressary to ensure: No —— (If If yes, | no, go to Q14) | is comprehensive. Please be as |
| We the third | We would in the below of the be | nuch appreciate letails with a conformation given an an insuration of the following per of Claim Employers Liab | e if you woul olleague or yo n will be treate nce claim in ng details: | our broker. T ted in a strictly the past 5 yea Has the cl | his information is new y confidential manne | ressary to ensure: No —— (If If yes, | no, go to Q14) | is comprehensive. Please be as |
| We then the | We would in the below of the be | nuch appreciate letails with a conformation given an an insuration of the following per of Claim Employers Liab | e if you woul olleague or yo n will be treate nce claim in ng details: | our broker. T ted in a strictly the past 5 yea Has the cl | his information is new y confidential manne | ressary to ensure: No —— (If If yes, | no, go to Q14) | is comprehensive. Please be as |
| We thin the H Pl Ye 200 200 200 200 200 200 200 200 200 20 | We would not below to nat any information and any information and any information and informat | nuch appreciate letails with a conformation given an ade an insuration of the following of Claim Employers Liab (as per Q9) | e if you woul olleague or yo n will be treate nce claim in ng details: eg. bility | the past 5 years Has the cl | his information is new y confidential manne | ressary to ensure: No —— (If If yes, | no, go to Q14) | is comprehensive. Please be as |
| We thin the H Pl Ye 200 200 200 200 200 200 200 200 200 20 | We would not below to nat any information and any information and any information and informat | nuch appreciate letails with a conformation given an an insuration of the following per of Claim Employers Liab | e if you woul olleague or yo n will be treate nce claim in ng details: eg. bility | the past 5 years Has the cl | his information is new y confidential manne | ressary to ensure: No —— (If If yes, | no, go to Q14) | is comprehensive. Please be as |
| We the three | We would not below to nat any information and any information and information | nuch appreciate letails with a contract of contract of contract of the following per contract of | e if you woul olleague or yo n will be treate nce claim in ng details: eg. oility on of claims: | the past 5 year Has the cl Yes / No | his information is new confidential manners? Yes —— aim been settled? | ressary to ensure: No —— (If If yes, amount tion? Yes — | re that the study no, go to Q14) please state nt (€) paid | If no, please state amoun (€) outstanding |
| We the three | We would not below to nat any information and any information and information | nuch appreciate letails with a contract of contract of contract of the following per contract of | e if you woul olleague or yo n will be treate nce claim in ng details: eg. oility on of claims: | the past 5 year Has the cl Yes / No | his information is new confidential manners? Yes —— aim been settled? | ressary to ensure: No —— (If If yes, amount tion? Yes — | re that the study no, go to Q14) please state nt (€) paid | is comprehensive. Please be as |
| We the the the the the the the the the th | We would in the below of the be | nuch appreciate letails with a control of communication given and an insuration of the following period of the following perio | e if you woul olleague or yo n will be treat nce claim in ng details: eg. oility on of claims: y problems g sons you feel | the past 5 years Has the cl Yes / No | his information is new y confidential manner y confidential manner ars? Yes ——————————————————————————————————— | ressary to ensure: No —— (If If yes, amount tion? Yes — | re that the study no, go to Q14) please state nt (€) paid | If no, please state amoun (€) outstanding |
| We then the the then the then the then the then the then the the then the then the then the then the then the the then the | Ve would in the below of the be | much appreciate letails with a control of the following of Claim Employers Liab (as per Q9) brief description and the rease are the rease rank the rease rance premiums | e if you woul olleague or yo n will be treate nce claim in ng details: eg. oility on of claims: y problems g sons you feel | the past 5 years Has the cl Yes / No getting insurar your organis: | his information is new confidential manner of the property of | tion? Yes—ese problems (| re that the study no, go to Q14) please state nt (€) paid | If no, please state amoun (€) outstanding |
| We the the the the the the the the the th | We would in the below of the be | much appreciate letails with a control of communication given and an insurance of communication of the following period of the | e if you woul olleague or yo n will be treate nce claim in ng details: eg. oility on of claims: y problems g sons you feel s too high qu receiving a qu | the past 5 year Has the cl Yes / No getting insurar your organis | his information is new confidential manner of the properties of th | tion? Yes—ese problems (| re that the study no, go to Q14) please state nt (€) paid | If no, please state amoun (€) outstanding |
| We the the the the the the the the the th | We would in the below of the be | much appreciate letails with a control of communication given and an insurant ide the following per Glaim Employers Liab (as per Q9) brief description and the reason and | e if you woul olleague or yo n will be treate nce claim in ng details: eg. oility on of claims: y problems g sons you feel s too high qu receiving a qu | the past 5 year Has the cl Yes / No getting insurar your organis | his information is new confidential manner of the properties of th | tion? Yes—ese problems (| re that the study no, go to Q14) please state nt (€) paid | If no, please state amoun (€) outstanding |
| We the the the the the the the the the th | We would in the below of the be | much appreciate letails with a control of communication given and an insurance of communication of the following period of the | e if you woul olleague or yo n will be treate nce claim in ng details: eg. oility on of claims: y problems g sons you feel s too high qu receiving a qu | the past 5 year Has the cl Yes / No getting insurar your organis | his information is new confidential manner of the properties of th | tion? Yes—ese problems (| re that the study no, go to Q14) please state nt (€) paid | If no, please state amoun (€) outstanding |
| We the the the the the the the the the th | We would in the below of the be | much appreciate letails with a control of communication given and an insurant ide the following per Glaim Employers Liab (as per Q9) brief description and the reason and | e if you woul olleague or yo n will be treate nce claim in a ng details: eg. oility on of claims: y problems g sons you feel s too high qu receiving a qu ganisation's pr | the past 5 years the pa | his information is new confidential manner of the property of | tion? Yes—ese problems (| re that the study no, go to Q14) please state nt (€) paid | If no, please state amoun (€) outstanding |
| We the the the the the the the the the th | We would in the below of the be | brief description and the reason and | e if you woul olleague or yo n will be treate nce claim in a ng details: eg. oility on of claims: y problems g sons you feel s too high qu receiving a qu ganisation's pr | the past 5 years the pa | his information is new confidential manner of the confidential manner of th | tion? Yes—ese problems (| re that the study no, go to Q14) please state nt (€) paid | If no, please state amoun (€) outstanding |
| We the the the the the the the the the th | We would in the below of the be | brief description and the reason and the reason and the reason and the reason are premiumated | e if you woul olleague or yo n will be treate nce claim in a ng details: eg. oility on of claims: y problems g sons you feel s too high qu receiving a qu ganisation's pr | the past 5 years the pa | his information is new confidential manner of the confidential manner of th | tion? Yes—ese problems (| re that the study no, go to Q14) please state nt (€) paid | If no, please state amoun (€) outstanding |

If you require any assistance in completing this questionnaire please contact Hannah Perrin or Don Briggs at The Wheel on (01) 454 8727

Thank you for contributing to this important research project, the results of which will be reported back to all participants PLEASE NOTE THAT SPECIFIC ORGANISATIONAL DATA WILL BE TREATED IN STRICTEST CONFIDENCE

Please return to: The Wheel, Irish Social Finance Centre, 10 Grattan Crescent, Inchicore, FREEPOST F3030, Dublin 8.

before the 22nd October 2005 – all respondents will be entered into a draw for a digital camera